

Urgent Dental Problems & Access to Care During Pregnancy Among California Women with a Live Birth, 2008

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This project was supported by Federal Title V funding.

Objective

To determine the prevalence of urgent dental problems among California women who recently gave birth and reasons why dental care was not received during pregnancy.

Background

- Maternal oral health during pregnancy is important to the well-being of both the expectant mother and her baby. When a mother improves her oral health she may prevent complications of oral infection in her own mouth, improve her birth outcome and decrease dental caries in her child.¹
- Dental treatment is considered safe throughout pregnancy.² Many health professional organizations recommend that women visit a dentist during pregnancy for perinatal oral health care and appropriate services.²
- Urgent dental problems that need immediate attention by a dentist, such as a toothache, dental decay or periodontal disease, indicate current oral infection. Because maternal oral infection may have negative consequences for the mother or her baby, it may become more important that a pregnant woman receive appropriate professional care as soon as possible rather than delay care until after delivery. However, many women do not visit a dentist before, during, or after pregnancy, even when there are obvious signs of oral disease.³
- Advocates for maternal and child health in California are striving to improve the utilization of oral health services by pregnant women. An analysis of women's oral health status during pregnancy, their decision to seek professional dental care, and if not, the reasons for not receiving care should be completed and understood before recommending strategies to increase oral health education and professional care to women during the perinatal period.

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Methods

- Pregnant women with urgent dental problems were identified using the 2008 Maternal and Infant Health Assessment (MIHA) survey (n=3,035), an annual, statewide, representative survey of California women who recently gave birth to a live infant.
- Urgent dental problems were defined as symptoms of existing oral infection that require immediate attention by a dentist. These symptoms were listed as loose tooth, needed tooth extraction, painful, red or swollen gums, cavities, toothache and excessively bleeding gums.
- Weights were applied to account for sample stratification and sampling design.

Figure 1. Urgent dental problems during pregnancy (unweighted n=3,035; weighted n=550,905)

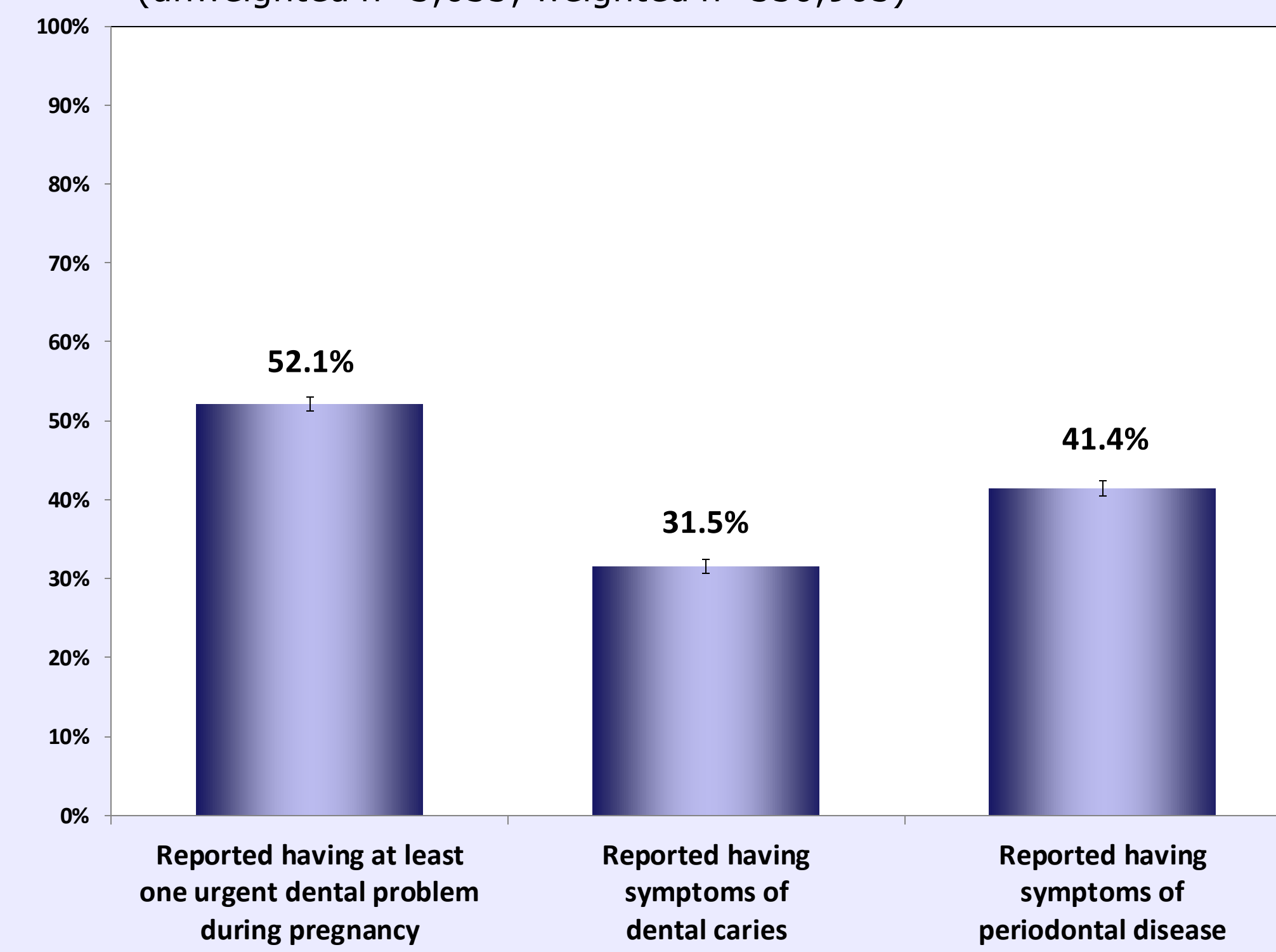


Figure 2. Types of urgent dental problems during pregnancy (unweighted n=3,035; weighted n=550,905)

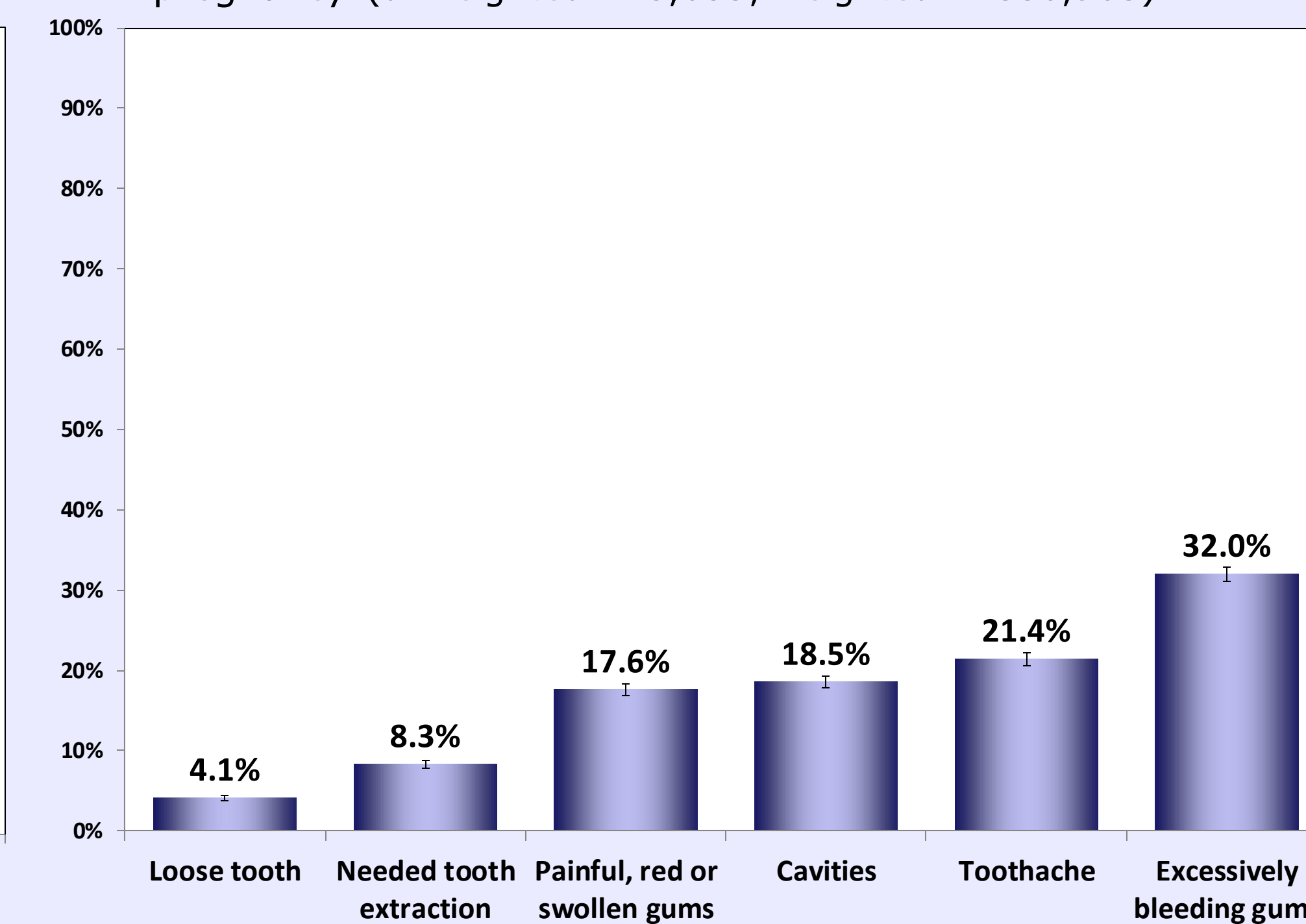


Figure 3. Number of urgent dental problems during pregnancy among women who reported having at least one dental problem (unweighted n=1,592; weighted n=285,780)

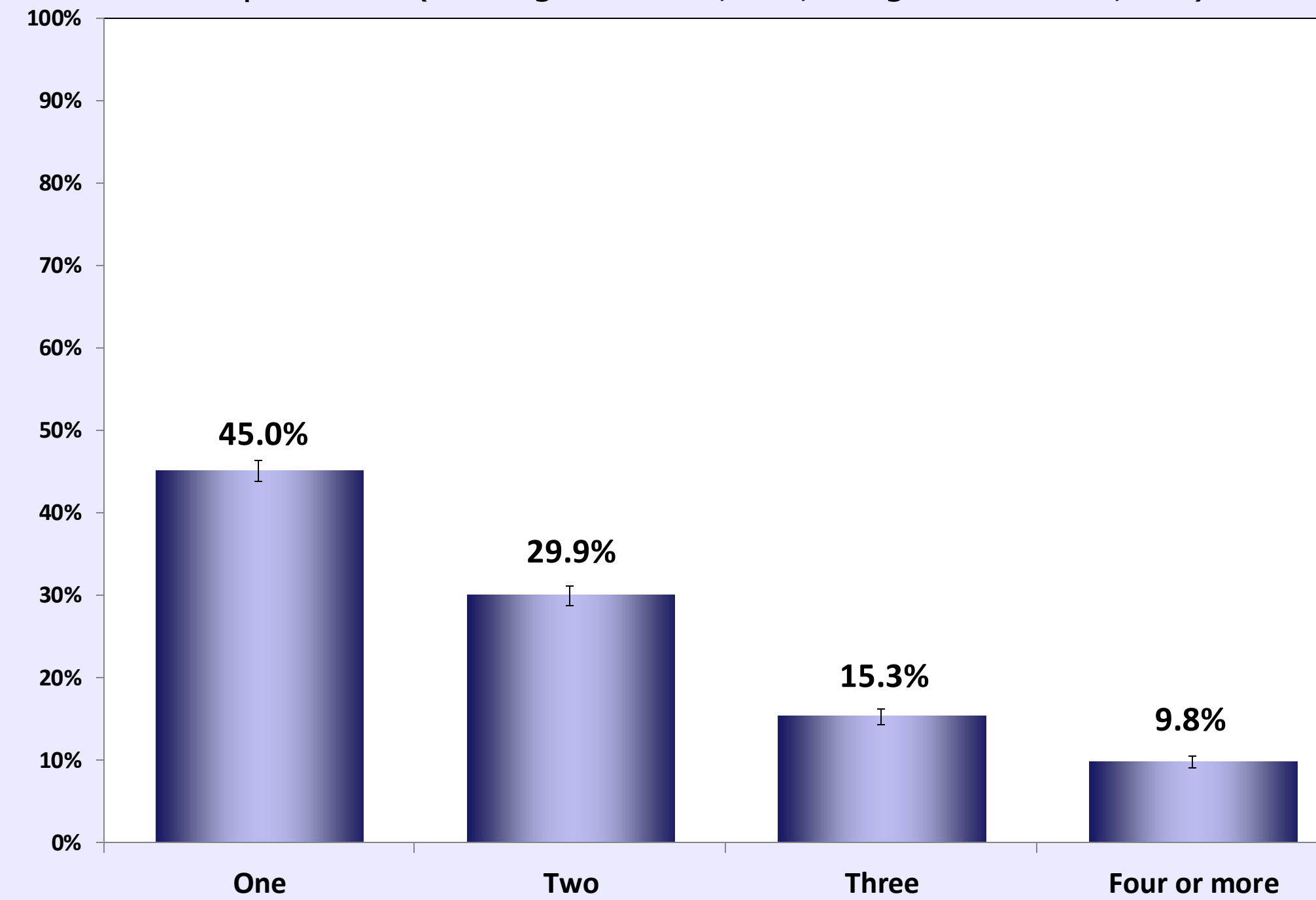


Figure 4. Urgent dental problems and utilization of dental care during pregnancy (unweighted n=2,956; weighted n=536,736)

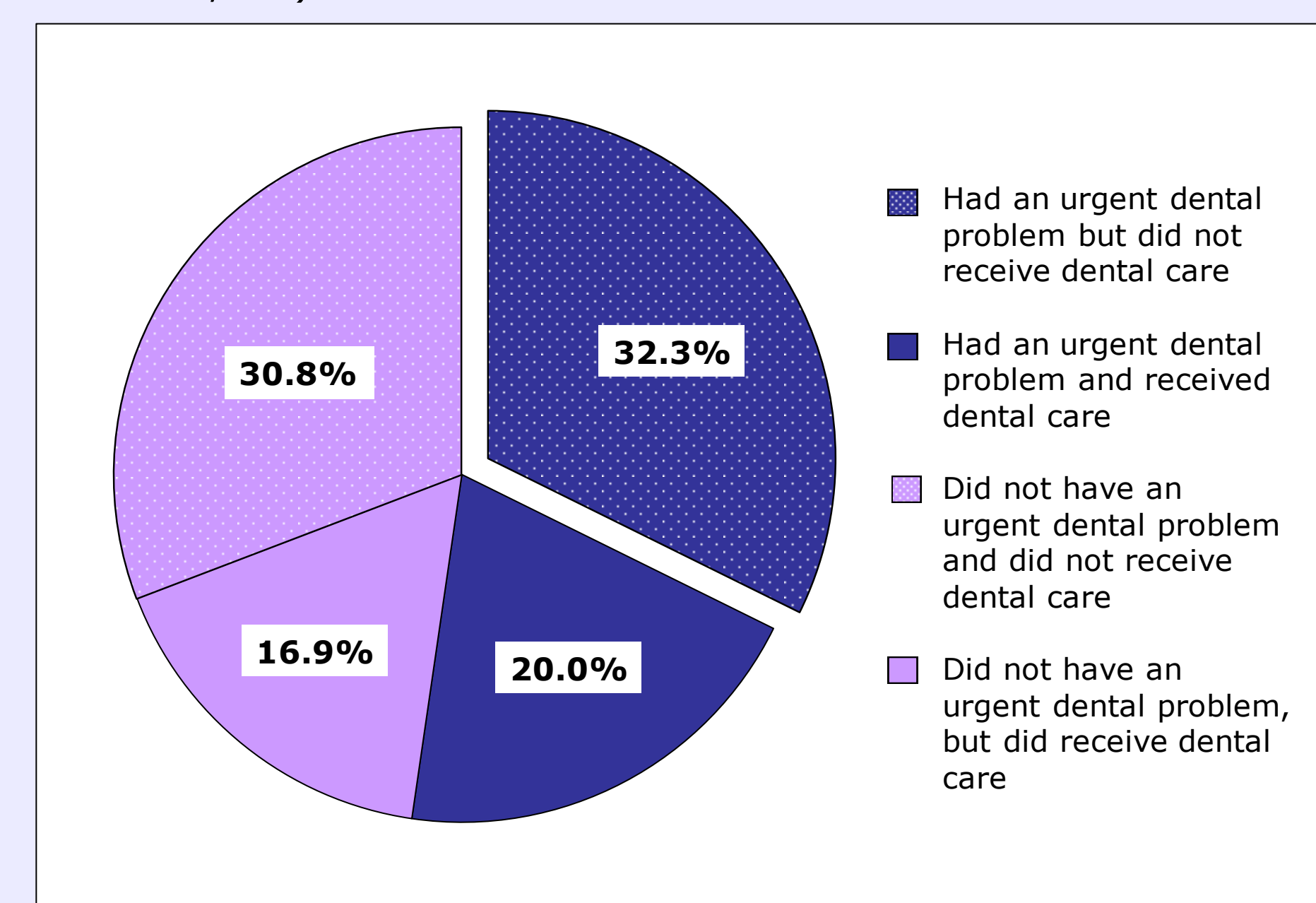
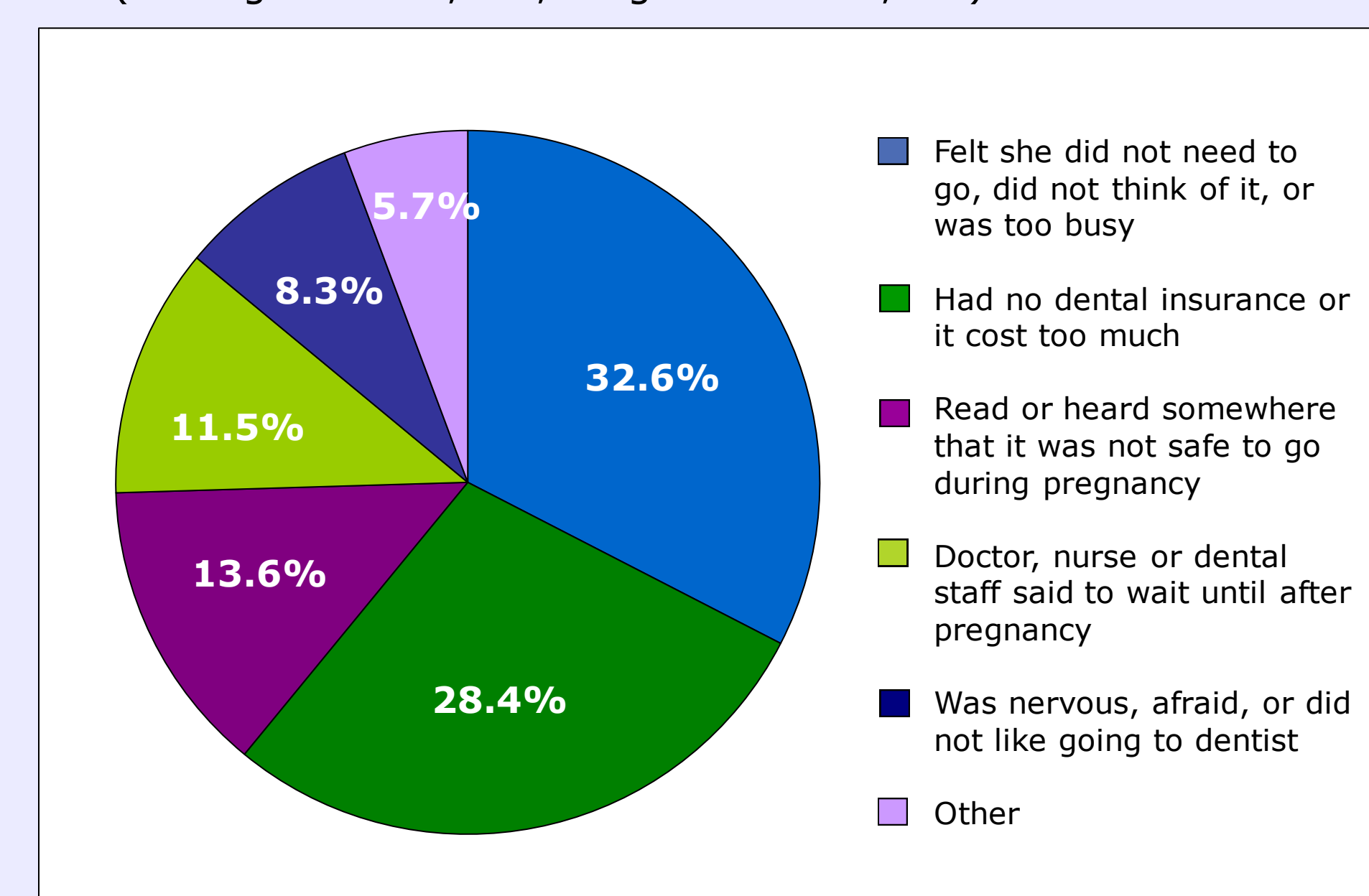


Figure 5. Main reasons why women with urgent dental problems during pregnancy did not receive dental care (unweighted n=1,592; weighted n=285,780)



Results & Conclusions

- 52.1% of women who gave birth reported having at least one urgent dental problem during pregnancy (Figure 1).
- 31.5% of women reported signs of dental caries, such as toothache, cavities, or needing a tooth extraction. 41.4% reported symptoms of periodontal disease, which included bleeding, painful, red or swollen gums, loose teeth, or a tooth that needed to be extracted (Figure 1).
- The most common urgent dental problem was gums that bled excessively (Figure 2).
- Of the women who reported having an urgent dental problem, 45.0% reported having one problem, 29.9% reported having two problems, 15.3% reported having three problems, and 9.8% reported having four or more urgent dental problems (Figure 3).
- 32.3% of women had an urgent dental problem during pregnancy but did not receive dental care (Figure 4).
- The most common reason why pregnant women with an urgent dental problem did not receive dental care was they felt they did not need to go, did not think of it, or were too busy (32.6%). The second most common reason was lack of insurance or it cost too much (28.4%; Figure 5).
- 25.1% of women with urgent dental problems reported they were told by a health care professional or heard somewhere else that it was not safe to get dental care during pregnancy (Figure 5).
- There appears to be a misconception about the importance and safety of receiving dental care during pregnancy.

Recommendations

- Educate women and health care providers regarding the impact of oral health on overall health and the safety of receiving dental care during pregnancy.
- Encourage pregnant women to get a professional oral health assessment and to adhere to the recommendations of their dental providers.
- Educate expectant mothers easy, inexpensive and effective strategies they can integrate into their daily routines to reduce the incidence of tooth decay.
- Integrate oral health education and referrals as part of routine perinatal care provided by obstetricians, nurses and family physicians.
- Provide regular dental care to all women of reproductive age as a primary prevention strategy.



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